### **Fullerton School District** Child Development Services (714) 447-7477

### TheLAB Registration

Receipt #	<u>+</u>
Check#	

Participation Agreement

Emergency Card

Payment

Tuition Fee/ Calendar

This program is currently open to students enrolled at the school listed below in the Fullerton School District. Information

				Elemen		
ne of Student _		(0)	Gr	ade	DOB	Sex
	(last name)	(first name)				
me Address						
	(address and street)	(Apt. #)	(City)	)	(Zip)	
me Phone # (		Cell Phone ()	** 7	E	-mail	
me of Nother/ C	uardian		Wo	rk Phone	#	
ine of Paulei/ O	iai Giaii		wo	rk Phone	#	
A 10% discount	on the lesser fee is ava	ilable for sibling enrolled	in the Chi	d Develo	pment Progra	am, excluding AM C
Fern Drive				<u>Tuitio</u>	n Amount	Please mark
*Am Care TK	-6th				\$125.00	
*TK-Part Day	Care - MTTHF 12:0	00 - 2:55 pm Wed. 12:00	- 1:10 pm		\$195.00	
TK-Full Day					\$390.00	
Pm Care K - 6	th				\$295.00	
	*Must have n	ninimum student enrollmer	ıt; Tuition is	based on	a monthly rate.	N. C.
1		onthly flat rate, will not b	A 211 C 41 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1			_
		to be made payable to -F		-		
	Fee includes minim	um days, 1 staff developm	ent/conferer	nce day, a	nd early releas	se day.
ore School Care	is 6:30 a.m opening	g of school. Child will b	e enrolled	on a spac	e-available b	asis. Before school
		r: Opening hours are de		_		
		Fullerton School Distr				
	<b>School Child Care</b>	is available between the	e hours of	school di	smissal and 6	5:00 pm.
(Signature of	Parent/Guardian)		(Da	ate)		
(= -8						300.000
(=-8						Registration Checklist:
(= g						Registration Checklist:  Registration Form  Contract

## Fullerton School District Child Development Program Contract

### TheLAB

#### **CONTRACT:**

My child, is entering grade in August 13, 2018 and is enrolled in <b>Fern Drive School</b> . My child will be attending TheLAB Child Development Program during the following times (please material).				
Fern Drive	Tuition Amount	Please mark		
*Am Care K-6th	\$125.00			
*TK-Part Day Care -MTTHF 12:00 -2:55 pm Wed. 12:00 - 1:10 pm	\$195.00			
TK- <u>Full day</u>	\$390.00			
Pm Care K- 6th	\$295.00			
*Must have minimum student enrollment; Tuition is based on a monthly rate.				

#### Registration

A non-refundable deposit of \$75.00 is required for individuals and \$125.00 per family at registration along with the completion of all paperwork. Please make copies for you records. Before School Care is based on a minimum enrollment of students.

#### **Monthly Tuition Fee**

Fees must be paid by the first of the month. If whole payment is not received by the fifth (5th) business day, a \$25 late fee will be assessed and your child will not be allowed to return until the unpaid balance is paid in full. Delinquent payments will result in automatic termination from the program. All checks returned for any reason will be assessed a twenty-five dollar (\$25.00) return check fee. Returned checks must be replaced with a money order or cashiers check the day following notification in order to avoid being referred to a collection agency. You will no longer be able to pay with personal check. The tuition fees for the remainder of the year will need to be paid by money orders or cashier checks. No exceptions. Monthly checks are to be made payable to Fullerton School District, Child Development Services. Monthly statements will not be issued.

#### Termination/Withdrawal

I understand that I must give written notice to the Site Lead at least thirty (30) working days in advance of withdrawing my child or changing his/her schedule and fees are to be paid up to the withdrawal date. Child Development TheLAB Program may, for any reason, terminate this contract with two weeks notice. Refunds will not be made if my child is terminated from the program for any reason. If at any time the District determines that my child is unable to benefit from the program, or he/she impairs the ability of other children to benefit from the program or his/her continued presence in the program presents a danger to others or to property, the District may terminate this agreement.

#### Late Pick up fees

Child Development The LAB Program sites are open from 6:30 A.M. until 6:00 P.M\*. Children are not to be dropped off prior to the opening of the program. Children are to be picked up no later than 6:00 P.M. Parents/guardians of any child not picked up by 6:00 P.M. will be charged one dollar (\$1.00) per child per minute. The late fee will be applied to your next month's tuition. Any child not picked up within a reasonable time after the closing of the sites'

facilities (not to exceed thirty (30) minutes, will be placed in the care of the local police department when no contact from the parents has been received by the Site Lead to indicate that the child will be picked up late. After the third occurrence of excessive or chronic lateness, the Director/Site Lead may dismiss the child from the program. The clock at TheLAB Program site will be used to determine the pick-up time. \*Opening hours at sites are dependant upon enrollment.

#### SIGN IN/SIGN OUT PROCEDURES

I understand that my child MUST be signed in and out at the Child Development TheLAB Program each day and may not be dropped off at the curb. If for any reason my child is not signed in, they will not be accepted and will be directed to the school's office. My child may only be signed out and/or picked up each day by parent/guardian or an adult (18 yrs. or older) authorized by the parent/guardian in writing on file with the Child Development TheLAB Program site. This procedure is for my child's safety and MUST be adhered to all times.

#### **HOLIDAYS**

The LAB is closed on all official school holidays, and staff development days. Please refer the calendar in the Tuition Fees/School calendar and/or the Parent Handbook.

#### **MEDICATIONS**

The Child Development TheLAB Program **does not** administer medications. I understand and agree that my child may not have medicines in their possession and may not medicate him/herself. If my child requires medication as prescribed by a physician, I understand that it must be administered by his/her parent/guardian or by trained personnel in the school office prior to coming to the Child Development TheLAB Program and must be done in accordance with District and school policies covering the possession and administration of medication.

#### **ILLNESS/INJURY/EMERGENCY**

Children who have been ill, had a fever, vomited or had diarrhea during the previous 24 hours MAY NOT be brought to the Child Development Program. If my child becomes ill or injured at the Child Development Program, I will be notified as soon as possible and I will pick up my child immediately or will arrange for the immediate pick up of my child by an authorized adult. *Tuition fee refunds/credits will not be made for illness or absence.* I will keep all contact and emergency information current and up-to-date. In case of an emergency — a life-threatening situation — as determined by the Child Development staff, the paramedics will be called. Emergency/medical personnel will determine the appropriate course of action and I will be responsible for any of my child's emergency medical/dental expenses.

#### **AGREEMENT**

I understand that childcare will be provided for my child only as I fulfill each of the above requirements. I also understand and agree that the tuition fee schedule is subject to change at the discretion of the District, however I will receive two (2) weeks notice of any changes in fees. I also understand and agree that the District may change the rules, regulations, policies and procedures of the Child Development Program, I will be given a two (2) weeks notice prior to the implementation of any change. Additionally, in the event that the Fullerton School District decides to institute legal action or other collection of monies due on my account will be paid by parent/guardian to the Fullerton School District. Providing false or misleading information on this contract or other enrollment documentations is grounds for the immediate termination of this agreement and dismissal of my child from the Child Development Program.

I HAVE READ AND UNDERSTAND THE PROVISIONS OF THIS CONTRACT AND AGREE TO UPHOLD AND ABIDE BY THEM. I HAVE RECEIVED A COPY OF THIS CONTRACT.

Print Name of Parent/Guardian	Signature of Parent/Guardian	Date:	
Street Address	City	Zip code:	

#### **Fullerton School District**

Child Development Program

#### TheLAB

#### **Participation Agreement**

To ensure a cooperative, safe, and caring environment, the following Assertive Discipline Program will be followed and the Behavior/Discipline Contract enforced by the staff of the Fullerton School District Child Development Program. Standards of behavior in the Child Development Program parallel those of the school and classroom and are focused on avoiding injury and/or property damage. Please review rules with your child, complete the Behavior/Discipline Contract and return it to the Child Development Program Site Leader prior to the first day of attendance.

#### **Child Development Program Rules**

- Directions are followed the first time they are given.
- We keep our hands, feet, mouth, and objects to ourselves.
- We stay in our assigned areas.
- We make proper use of the all facilities including restrooms.
- We use materials, supplies, and indoor or outdoor equipment properly.
- We always treat others with respect and never use foul language, call names, tease or bully others.

#### Appropriate Behavior

Each Child Development Program site uses a wide variety of rewards to recognize, acknowledge and support the students' use of "good behavior". Rewards and privileges recognizing appropriate behavior will vary from site to site and may include celebrations, group parties, individual and group points, coupons, verbal praise and notes to parents. Contact the Site Leader at your child's school to learn more about their positive behavior program so that you can support and reinforce your child's good conduct.

#### **Inappropriate Behavior**

Examples of inappropriate and unacceptable behaviors include: not following directions the first time they are given, leaving assigned areas without permission, use of foul language, threatening the health or safety of others, hitting/kicking/scratching/biting/choking others, throwing rocks, dirt, sticks, etc. at others, stealing, damaging or destroying property, general disrespect or defiance, noncooperation. If a child is deemed to be out of control, the parent/guardian will be called to immediately come to pick up the child for the remainder of the day. Children who have repeated difficulty behaving appropriately will be temporarily suspended or permanently dismissed from the program. Children who are suspended or dismissed from a site may not enroll at another FSD Child Development Program site.

#### The following steps may be applied for inappropriate behavior:

Step One: Child is given a verbal warning and instructed to correct his/her behavior.

Step Two: Child is put on a "time away" – "away" from the activity or from other children.

Step Three: Child is put on a second "time away", given a written warning, and parents are notified. Parents are expected to discuss the inappropriate behavior with their

child and to work with the Child Development staff to stop the misbehaviors.

Depending upon the seriousness of the behavior, written warnings and/or "time away" may be given immediately as determined by the Child Development staff. If the Site Leader decides it is

#### **Fullerton School District**

Child Development Program

necessary to remove a child from the program, his/her parent will be called to pick up their child immediately.

#### Suspension Or Termination (Student)

- If a student receives three (3) written warnings within a two-week period, parents/guardian will be given the first notice of possible termination from the program. The student may be suspended from the program for up to five (5) days.
- The next written warning received by the student will lead to the parents receiving the second notice of possible termination from the program and a mandatory five (5) day suspension from the program. Parents/guardian will be required to contact the Site Leader and schedule a meeting to discuss a specific plan to correct the child's behavior. The child may not return to the Child Development Program until the conference has been held.
- The next written warning following the conference between the Site Leader and the parents will result in the child being terminated from the Child Development Program.
- Immediate suspension or termination from the Child Development Program may occur if, in the opinion of the Site Leader, your child's behavior poses a danger to him/herself or others or to property; or if your child is willfully defiant of staff and/or Child Development rules/procedures.
- Suspension and/or termination from the Child Development Program may also take place if a student has continual and repeated violations of program rules/procedures.

#### **Suspension Or Termination (Parent)**

The Child Development Program reserves the right to suspend and/or terminate participants due to the actions of parents/guardians. Suspension and/or termination may occur for any of the following:

- Arriving repeatedly late to pick up children from the Child Development Program.
- Tuition payment is repeatedly late, or for non-payment of tuition fees.
- In-appropriate behavior towards Child Development Program staff or other school district employees use of inappropriate language, being verbally or physically threatening or intimidating, any physical aggression and/or damage to property.
- Disregard and/or refusal to follow procedures and guidelines of Child Development Program's

	Date:	
Student Signature		
	t and have discussed it with my child. I agree to pport the Child Development staff as it may per	
 Signature of Parent/	Date:	

# TheLAB Emergency Card Information

School:		=======================================			Sch	ool Year:_	
Child's Name:					<del></del>		
La	st	First	Mid	ldle	Sex (M	<b>I</b> /F)	DOB
Residence:					E-n	nail:	
Numb	er/Street	Apt. #	City	Zip			
Home phone # (_	),		Cell/Alte	ernate # (			
Student resides with	(circle all that a	pply) Father	Mother Step	Parent /Guardia	an (form is	on file) Othe	r
Siblings enrolled in	FSD Child Do	evelopment	Program, list t	he eldest firs	t		
Last Name		First Nam	ie	Sex (N	M/F)	Grade	DOB
<del></del>	N -		38		_ (_).		_ (_)
Father Last Name	First		Employer's Nam	e/ Location		phone #	Cell #
Mother Last Name	First		Employer's Nan	ne/ Location	_ `_ `	phone #	Cell#
Step Parents/Legal Gua	rdians						
L agt Name	—(I (	<del></del>	F12-N	-/T t'	(_)	1	(_)
Last Name	First		Employer's Nam	e/ Location	work	phone #	Cell#
Last Name	First		Employer's Name/ Location			phone #	Cell#
Other Authorized A	Adult Contacts	<u>s</u>					
Adults (other than th	ose listed abov	e), at least	18 years old, au	thorized by m	e to pick -	my children	and who have agreed
to be responsible for	them when par	rents/guardia	ans cannot be re	ached. This in	nformation	n must be k	ept current at all
times. You must incl	lude at <b>least tw</b>	o (2) local i	<b>ndividuals.</b> On	ly these people	e are allow	ed pick up c	hildren from the FSD
Child Development	_						
	The inform	nation listed bel	ow is usable during	hours of the Child	Development	Program.	
Name	Address		Relationship	)	Phone	#	Cell#

## TheLAB Emergency Card Information

Medical Emergency Instructions in the event of an emergency as determined by the Child Development Site Lead his/her designee,9-1-1 will be called. By my signature I authorized emergency personnel to treat my child(ren) and determine if additional treatment is needed. I authorize them to transport my child to an appropriate hospital emergency/trauma facility. I authorize physicians and other medical personnel to perform diagnosis and treatment (including surgery) necessary to stabilize or save my child's life. I agree to be responsible for all cost incurred in the treatment of injuries/illnesses, which may have occurred while my child attends a Child Development Program (TheLAB). My child's physician may be contacted as he /she is permitted to share information pertaining to my child's treatment and other medical conditions. By my signature below I authorize an agree to these medical emergency instructions.

Physician's Name:	Telephone #	
Medical Insurance Company:		
Drug Allergies:		
Other Allergies/ Conditions:		
Religion: Cleric:		
First person to be contacted in an emergency:		
EMERGENCY EVACUATION INSTRUCTIONS: In	case of an emergency requiring the closure/evacuation of the	
Child Development Program (TheLAB), students will rea	main in the care of District Personnel. When the Site Lead	
determines it is safe, individual children may be released	to parents or other adults specified by parents/guardians. In	
extreme disaster/emergency children may be released	to adults well known to them. All releases will be documented.	
Please check all boxes that apply.		
☐ My child may be released to any of the adults listed on	this card (identification will be required)	
	<u></u>	
	n school:	
TRANSPORTATION PERMIT: In accordance with the	e Education Code Section 35330 parents must give written	
authorization before your child can be transported. Without	out this signed consents the Child Development Program will not	
allow your child to be transported to field trips, programs event.	s, and events, Notification will always be sent home prior to any	
☐ By my signature below I give permission for my child	(ren) to be transported on district-approved conveyances to FSD	
Child Development Programs/events during the current s	school year. (Notification will be sent home prior to any field	
trip).		
PHOTO RELEASE: Authorization for the FSD Child I	Development Program to use pictures taken of your child(ren)	
	emonies for educational purpose including newspaper and other	
media publication.		
☐ I APPROVE of photograph/video release without rese	ervation or compensation.	
□ I Do NOT Approve of photograph/video release of m	ny child(ren).	
By my signature I attest to the correctness and validity of	f the information I have provided on this card. I also attest that I	
	nditions and information contained in this Emergency Card.	
I agree to keep this information current and up-to-date.		

## **Fullerton School District Child Development Services**

### TheLAB

#### **Tuition Fees:**

The LAB is a self-sustaining program funded solely through parent fees. All fees go directly into the care of your child.

Payments are due on the 1st of every month. The person that signs the contract is responsible for the tuition fees. We do not accept fees from two separate parties. If whole payment is not received by the 5<sup>th</sup> business day, a \$25 late fee will be assessed and your child will not be able to return the following day until the unpaid balance is paid in full.

**NSF returned checks** will require payment by **money order or cashiers check** along with a \$25 return check fee or your child will be dismissed from the program until payment is made in full. At this point you will no longer be able to pay with personal checks for the remainder of the school year and payment must be made with a **money order/cashiers check ONLY.** If payments are not made, your account will be turned over to a private collection agency at the end of week. If you choose to withdraw your child from the program, a 30-day notification is required with full payment.

Please keep your receipts for your records for tax purposes. If you have monthly automatic credit card withdrawals, your bank statements will be your receipts.

#### Fullerton School District Tax Identification Number is 95-6001405.

Monthly fees include 180 school days and minimum days, for staff development and conference week.

LAB Sites: Tuition Fees	Tuition Amount
AM Care Tk-6th: (*Acacia, *Beechwood,*Fern, *Fisler, *Hermosa, *Laguna, *Sunset Lane)	\$125.00 mo.
AM Care K-6th (*Golden Hill)	\$130.00 mo.
Late Bird K (6:30 am to 10:45 am) *Golden Hill	\$130.00 mo.
AM Care K-6th (*Rolling Hills)	\$150.00 mo.
Kinder Part-Day (Rolling Hills)	\$170.00 mo.
Tk-Part Day (*Fern Drive, *Sunset Lane)	\$195.00 mo.
Kinder-PM Care (*Beechwood,*Fisler, *Laguna)	\$300.00 mo
TK & Kinder Full-Day ( Acacia, Fern, Golden, Sunset, Rolling Hills )	\$390.00 mo.
PM Care - (K-6th) All Sites	\$295.00 mo.
*Must have minimum enrollment	

## **Fullerton School District Child Development Services**

## TheLAB

## Calendar

### \*Please note this is a tentative calendar may be subject to change.

First Day – Monday, August 13, 2018 Last Day – Monday, May 31, 2019

Labor Day	Monday	September 3, 2018	Closed
<b>Staff Development/ Conference</b>	Wednesday	<b>September 26, 2018</b>	Open
Staff Development	Monday	October 8, 2018	Closed
Veteran's Day	Monday	November 12, 2018	Closed
Thanksgiving Recess	Mon-Fri	November 19-23, 2018	Closed
Non - Student Day	Friday	December 21, 2018	Closed
Winter Recess	Mon-Fri	Dec. 24- January 4, 2019	Closed
Staff Development	Monday	January 7, 2019	Closed
Martin Luther King Jr. Holiday	Monday	January 21, 2019	Closed
Lincoln's Birthday	Monday	February 11, 2019	Closed
President's Holiday	Monday	February 18, 2019	Closed
Spring Recess	Mon-Fri	March 25–March 29, 2019	Closed
Memorial Day	Monday	May 27, 2019	Closed

Child Development Services	Director, Child Development Services	Supervisor, Child Development Services
1401 W. Valencia Drive	Marilee Cosgrove	Linda Jimenez
Fullerton, CA 92833	714-447-2858	714-447-7477
********	*********	********
Tuition Fed	es / School Calendar Acknowle	dgment
Parent's Name	have received a copy of th	e Tuition Fees/Holiday
Calendar for Child Developmen	at Services TheLAB 2018/19 s	school year. I understand the
policies, rules, procedures and pra	ctices that are outlined in the Tui	ition Fees/School Calendar.
Signature of Parent/	Guardian	Date:
Name of Child	ren)	School Site: